PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

		Attorney Docket Numb	er		
DECLARATI	ON FOR UTILITY OF DESIGN	First Named Inventor	Garry Tsaur		
PATENT APPLICATION (37 CFR 1.63)		COMPLET	COMPLETE IF KNOWN		
		Application Number			
X Declaration	Declaration	Filing Date			
Submitted with Initial	ed OR Submitted after Initial	TODD AR DOD			
Filing) Examiner Name			

As a below named inventor, I hereby declare that:						
My residence, mailing address, an	d citizenship are as stat	ted below next to my nam	ne.			
I believe I am the original, first and names are listed below) of the sub	sole inventor (if only or ject matter which is clai	ne name is listed below) of med and for which a pate	or an original, firs ent is sought on t	t and joint inventor (if plural he invention entitled:		
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Multi-Channel Container						
	(Title of t	the Invention)				
the specification of which	(71110-07-1	ne mvendony				
X is attached hereto						
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable).					
I hereby state that I have reviewed amended by any amendment spec	and understand the co	ntents of the above ident e.	tified specification	n, including the claims, as		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						

DECLARATION — Utility or Design Patent Application

		1		
Oirect all correspondence to: X Customer Number or Bar Code Label 29745 OR Correspondence address below				
Name				
		WTA-2-10 10-10-10-10-10-10-10-10-10-10-10-10-10-1		
Address		T		
City		State	ZIP	
Country	Telephone		Fax	
I hereby declare that all statements made herein of mare believed to be true; and further that these staten made are punishable by fine or imprisonment, or both validity of the application or any patent issued thereon	ments were made wit th, under 18 U.S.C. 10	th the knowledge that willful	I false statements and the like so	
NAME OF SOLE OR FIRST INVENTOR:	A petition I	has been filed for this u	nsigned inventor	
Given Name Garry (first and middle [if any])		Family Name Tsau	ır	
Inventor's Signature			Date 10-5-2001	
Residence: City Rowland Heights	Country USA	Citizenship USA		
19222 Tranbarge Mailing Address	r Street			
city Rowland Heights	State CA	ZIP 91748	Country USA	
NAME OF SECOND INVENTOR:	A petition ha	s been filed for this un	signed inventor	
Given Name (first and middle [if any]) Family Name or Surname				
Inventor's Signature Date				
Residence: City	State	Country	Citizenship	
Mailing Address				
City	State	ZIP	Country	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

						ı
Please type a	plus sign	(+) inside	this box		+	į

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number			1
Filing Date			
First Named Inventor	Garry Tsaur		
Title	Multi-Channel	Conta	ne
Group Art Unit			
Examiner Name			
Attorney Docket Number)

I hereby appoir	nt:					1
X Practition OR	ers at C	ustomer Number	29745		Place Customer Number Bar Code Label here	
Practitions	er(s) na	med below:				
		Name		Regis	tration Number	
					e, and to transact all	l l
			Trademark Office co			
		spondence addres ed Customer Num	ss for the above-ide	entified applicati	on to:	
OR	mentior	ed Castomer Num	ibei.	1	Place Customer	
	s at Cus	stomer Number		──	Number Bar Code	=
OR					Label here	
Firm or Individual Na	me					
Address	 					
Address						
City				State	Zip	
Country						
Telephone				Fax		
l am the:						1
X Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71.						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Garry Tsaur						
Name						
Signature	<u> </u>		<u></u>			
Date		0-5-2001				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
□ *Total of		ms are submitted.				

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/09 (12-97)

Approved for use through 9/30/00 OMB 0651-0031

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT CLAIMING SMAL 37 CFR 1.9(f) & 1.27(b))INDE	Docket Number (Optional)					
Applicant, Patentee, or Identifier: Garry Tsaur						
Application or Patent No						
Filed or Issued:						
Title: Muti-Channel C	Container					
	state that I qualify as an independent invent to the Patent and Trademark Office describe					
X the specification filed herewith	h with title as listed above.					
the application identified abov	ve					
the patent identified above.						
grant, convey, or license, any rights in under 37 CFR 1.9(c) if that person h	I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).					
	on to which I have assigned, granted, conve ssign, grant, convey, or license any rights in					
X No such person, concern, o	X No such person, concern, or organization exists.					
Each such person, concern	, or organization is listed below.					
Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27) I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1 28(b))						
Garry Tsaur						
NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR				
(
Signature of inventor	Signature of inventor	Signature of inventor				
10-5-2001 Date	Date	Date				

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Washington, DC 20231